

<b>UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)</b>	<b>ATTORNEY DOCKET 86282WRZ Customer No. 01333</b>
<b>To:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450  <b>LIQUID DROP EMITTER WITH SPLIT THERMO-MECHANICAL ACTUATOR</b>  <b>First Named Inventor (or Application Identifier):</b>  Antonio Cabal, et al	<b>Express Mail Label No.</b>  <b>EV293511778 US</b>  <b>Date:</b> <u>June 27, 2003</u>



Enclosed are:

- |   |  |
|---|--|
| 1. <input checked="" type="checkbox"/> Specification<br><br>2. <input type="checkbox"/> 22 Sheet(s) of drawing(s)<br><br>3. <input checked="" type="checkbox"/> Information Disclosure Statement Under 37 CFR 1.97.<br><br>4. Combined Declaration for Patent Application and Power of Attorney:<br>4a. <input checked="" type="checkbox"/> New<br>4b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed))<br><br>5. <input type="checkbox"/> Incorporation by Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | 6. <input checked="" type="checkbox"/> Assignment of the invention to <b>Eastman Kodak Company</b><br>7. <input type="checkbox"/> Certified copy of a priority<br>8. <input type="checkbox"/> Associate Power of Attorney<br><br>9. <input type="checkbox"/> Deletion of Inventor(s).<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). |
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10. ☐ If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, after the title, by inserting the following:  
 --CROSS REFERENCE TO RELATED APPLICATION  
 Reference is made to and priority claimed from U.S. Provisional Application Serial No. , filed , entitled .

If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:

11. ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. ,  
 12. ☒ Please address all written communications to Milton S. Sales, Patent Legal Staff, Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.  
 Please Direct all telephone calls to William R. Zimmerli at (585) 588-2758.

The filing fee has been calculated as shown below:

FOR:	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE				\$ 750
TOTAL CLAIMS	31 - 20 =	11	x 18 =	\$ 198
INDEPENDENT CLAIMS	3 - 3 =	0	x 84 =	\$ 0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+ 280	\$0
			<b>TOTAL</b>	<b>\$ 948</b>

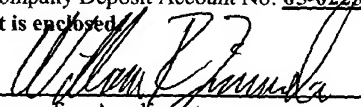
- ☒ Please charge my Eastman Kodak Company Deposit Account No. **05-0225** in the amount of **\$ 948**.

A duplicate copy of this sheet is enclosed

- ☒ The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. **05-0225**.

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